## SECOND CANCERS FOLLOWING ORAL CANCER

SECTION G: <u>DIET HISTORY</u>

#### IF NEXT-OF-KIN INTERVIEW, GO TO G-4. OTHERWISE, ASK G-1.

	II NEXT-OF-KIN INTERVIEW, GO TO G-4. OTHERWISE, ASK G-1.
Now I h	nave some questions about foods you ate over the last three years.
G1.	Including the past year, did your diet change significantly over the last three years?
	YES1 NO2 (G4)
G2.	How did it change?
G3.	Why did it change?

Now I will ask about foods (you/your\_\_\_\_) might have eaten during most of (your/his/her) adult life before one year ago. Again, if the eating pattern changed, please give me the usual pattern over the adult years.

	G4.	G5.
	Before one year ago, did (you/your) ever eat (FOOD)?	Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat (FOOD)?
a.	Stew made with beef, chicken, or lamb  YES	DAY
b.	Beef or calve's liver         YES	DAY
C.	Other beef, including hamburger, meatloaf, steak, and roast  YES	DAY
d.	Chicken liver, pork liver, or chopped liver  YES	DAY
e.	Chicken or turkey           YES	DAY

	G4.	G5.
	Before one year ago, did (you/your) ever eat (FOOD)?	Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat (FOOD)?
f.	Liverwurst, liver cheese, or liver sausage  YES	DAY
g.	Canned luncheon meats, cold cuts, or deli meats, such as bologna or hot dogs  YES	DAY
h.	Canned fish, including tuna fish, salmon, and sardines  YES	DAY
i.	Fresh or frozen fish  YES	DAY
j.	Shellfish such as shrimp, oysters, or crab  YES	DAY
k.	YES	DAY

G4.	G5.
Before one year ago, did (you/your) ever eat (FOOD)?	Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat (FOOD)?
I. Bacon, sausage, or canned ham  YES	DAY
m. Any other pork, including pork chops, ribs, roast pork, and fresh ham  YES	DAY
n. Vegetable soup  YES	DAY

Now I am going to ask you about foods that are sometimes eaten more often during particular seasons than during the rest of the year. I will ask if the food was eaten, and if so, whether it was eaten seasonally and how often.

	G6.	G7.	G8.
	Before one year ago, did (you/your) ever eat (FOOD)?	Did (you/he/she) eat (FOOD) mainly during particular seasons?	Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat (FOOD) (when it was in season)?
a.	YES1 (G7) NO2 (G6b)	YES1 (SPECIFY) NO2	DAY
b.	Sweet potatoes or yams  YES1 (G7)  NO2 (G6c)	YES	DAY
C.	White potatoes, fried, baked, boiled, or mashed  YES1 (G7)  NO2 (G6d)	YES 1 (SPECIFY) NO 2	DAY
d.	Fresh tomatoes  YES1 (G7)  NO2 (G6e)	YES 1 (SPECIFY) NO 2	DAY
e.	Tomato sauce, canned tomatoes, or tomato soup  YES	YES1 (SPECIFY) NO2	DAY

	G6.	G7.	G8.
	Before one year ago, did (you/your) ever eat (FOOD)?	Did (you/he/she) eat (FOOD) mainly during particular seasons?	Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat (FOOD) (when it was in the season)?
f.	YES1 (G7) NO2 (G6g)	YES	DAY
g.	Cabbage, not including coleslaw  YES1 (G7)  NO2 (G6h)	YES	DAY
h.	YES1 (G7) NO2 (G6i)	YES	DAY
i.	Fresh cucumbers  YES1 (G7)  NO2 (G6j)	YES1 (SPECIFY) NO2	DAY
j.	Green peas  YES1 (G7)  NO2 (G6k)	YES 1 (SPECIFY) NO2	DAY
k.	Plack-eyed peas  YES	YES1 (SPECIFY) NO2	DAY

G6.	G7.	G8.
Before one year ago, did (you/your) ever eat (FOOD)?	Did (you/he/she) eat (FOOD) mainly during particular seasons?	Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat (FOOD) (when it was in the season)?
Green beans, including pole beans and string beans  YES	YES	DAY
m. Other beans, such as lima beans, baked beans, pinto beans, kidney beans, and wax beans  YES	YES 1 (SPECIFY) NO2	DAY
n. Broccoli  YES1 (G7)  NO2 (G6o)	YES 1 (SPECIFY) NO2	DAY
o. Brussels sprouts  YES1 (G7)  NO2 (G6p)	YES	DAY
p. Green peppers  YES1 (G7)  NO2 (G6q)	YES 1 (SPECIFY) NO2	DAY
q. Corn  YES1 (G7)  NO2 (G6r)	YES	DAY

G6. G7. G8.	
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	Before one year ago, did (you/your) ever eat (FOOD)?	Did (you/he/she) eat (FOOD) mainly during particular seasons?	Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat (FOOD) (when it was in the season)?
r.	Summer squash, such as zucchini or yellow squash  YES1 (G7)  NO2 (G6s)	YES1 (SPECIFY) NO2	DAY
S.	Pumpkin or winter squash, such as Hubbard, butternut, or acorn squash  YES	YES1 (SPECIFY) NO2	DAY
t.	Greens, such as spinach, collards, mustard, kale, or turnip greens  YES	YES1 (SPECIFY) NO2	DAY
u.	Oranges  YES1 (G7)  NO2 (G6v)	YES	DAY
V.	Tangerines  YES1 (G7)  NO2 (G6w)	YES	DAY
W.	YES1 (G7) NO2 (G6x)	YES	DAY

G6.	G7.	G8.
Before one year ago, did	Did (you/he/she)	Over most of (your/his/her) adult life,

(you/your) ever eat (FOOD)?	eat (FOOD) mainly during particular seasons?	how many times per day, week, month, or year did (you/he/she) usually eat (FOOD) (when it was in the season)?
x. Cantaloupe  YES1 (G7 NO2 (G6		DAY
y. A slice of watermelon  YES1 (G7 NO2 (G6		DAY
z. Strawberries  YES1 (G7 NO2 (G6		DAY
aa. Peaches  YES1 (G7 NO2 (G6		DAY
bb. Nectarines  YES1 (G7 NO2 (G6		DAY
cc. Apples  YES1 (G7 NO2 (G6	· 1	DAY1

G6.	G7.	G8.
Before one year ago, did (you/your) ever eat (FOOD)?	Did (you/he/she) eat (FOOD) mainly during	Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat

		particular seasons?	(FOOD) (when it was in the season)?
dd. Pears	YES1 (G7) NO2 (G6ee)	YES1 (SPECIFY) NO2	DAY
ee. Bananas	YES1 (G7) NO2 (G6ff)	YES1 (SPECIFY) NO2	DAY
ff. Apricots	YES1 (G7) NO2 (G6gg)	YES1 (SPECIFY) NO2	DAY
gg. Ice cream	YES1 (G7) NO2 (G9)	YES	DAY

<b>G</b> 9.	G10.
Before one year ago, did (you/your) ever eat (FOOD)?	Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat (FOOD)?
a. Butter or margarine  YES1 (G10)  NO2 (G9b)	DAY
b. Cottage cheese or yogurt  YES1 (G10)  NO2 (G9c)	DAY
c. Other cheese, served by itself, or in a sandwich, or in a casserole  YES1 (G10)  NO2 (G9d)	DAY
d. White bread, rolls, biscuits, or muffins  YES1 (G10)  NO	DAY
e. Corn bread, fritters, corn, tortillas, or hush puppies  YES	DAY

	G9.	G10.	
Before one year ago, did (you/your) ever eat (FOOD)?		Over most of (your/his/her) adult life, how many times per day, week, month, or year did (you/he/she) usually eat (FOOD)?	
i	Whole grain breads, including whole wheat, rye, and pumpernickel or whole grain rolls or muffins  YES	DAY	
g. (	Cold breakfast cereals  YES1 (G10)  NO2 (G9h)	DAY	
h.	Hot cereals or grits  YES1 (G10)  NO2 (G9i)	DAY	
i.	Rice, noodles, spaghetti, or macaroni  YES1 (G10)  NO2 (G11)	DAY	
G11	. During most of (your/your's) adult life, eat?	how many meals per day did (you/he/she) usually	
	MEALS PE	ER DAY	
G12	During most of (your/his/her) adult life, before c	one year ago, how often did (you/he/she) usually had a strong smoky taste?	
	TIMES PER	DAY	

G13.	Was the smoking always done by (you/your_processing plant, or was it some of both?	) or a friend, was it always done by a
	PLANT	
G14.	How often did (you/your) usually ea (yourself/your) or a friend?	t smoked meat or fish that had been processed by
	TIMES PER	DAY
G15.	How often did (you/he/she) usually eat pickles	s or other pickled foods?
	TIMES PER	DAY
G16.	Was the pickling always done by (you/your processing plant, or was it some of both?	) or a friend, was it always done by a
	PLANT	
G17.	How often did (you/your) usually ea (yourself/your) or a friend?	t pickled foods that had been processed by
	TIMES PER	DAY
G18.	Before one year ago, did (you/your)	ever eat foods grilled over a charcoal fire?
		1 2 (G21)

G19.	Did (you/he/she) eat foods grilled over a charcoal fire mainly during a particular season?			
	YES (SPECIFY)	1		
	NO	2		
G20.	How often did (you/your) usually eat	charcoal-grilled foods (during the season)?		
		DAY1 WEEK2		
	TIMES PER	MONTH3 YEAR4		
	LESS THAN ONCE	A YEAR96		
G21.	During (your/your's) adult life, before multiple vitamin supplement such as One-A-Da	re one year ago, did (you/he/she) ever take a ay pills on a regular basis for six months or longer?		
		1 		
G22.	How old (were you/was he/she) when (you/he/supplement on a regular basis?	she) first started taking a multiple vitamin		
	<u>      </u> AG	 E		
G23.	How many times per day, week, or month did ( supplement?	you/he/she) usually take a multiple vitamin		
		DAY1		
	TIMES PER	WEEK2 MONTH3		
G24.	How many months or years did (you/he/she) ta basis?	ake the multiple vitamin supplement a regular		
		_ MONTHS1		
	NUMBER OF	YEARS2		
G25.	What was the multiple vitamin supplement that	t was usually taken?		
		TYPE		
		· · · · <b>-</b>		

	G26.	G27.	G28.
than multipl (your/your_ one year ago, d	's) adult life, before lid (you/he/she) ever take a regular basis for six	How old (were you/was he/she) when (you/he/she) first started taking (VITAMIN) on a regular basis?	How many years did (you/he/she) take (VITAMIN) on a regular basis?
a. Vitamin A	YES1 (G27) NO2 (G26b)	_  AGE	TOTAL YEARS
b. Vitamin B	YES1 (G27) NO2 (G26c)	_  AGE	TOTAL YEARS
c. Vitamin E	YES1 (G27) NO2 (G26d)	 AGE	TOTAL YEARS
d. Cod liver oil	YES1 (G27) NO2 (G26e)	 AGE	TOTAL YEARS
e. B vitamins	YES1 (G27) NO2 (G26f)	 AGE	TOTAL YEARS
f. Iron	YES1 (G27) NO2 (G26g)	 AGE	TOTAL YEARS
g. B12 shots	YES1 (G27) NO2 (G26h)	 AGE	TOTAL YEARS
h. Minerals	YES1 (G27) NO2 (NEXT SECTION)	_  AGE	TOTAL YEARS